

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.	FILING DATE	
						APPLICANT(S)		
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	/					51		
2						52		
3						53		
4						54		
5						55		
6						56		
7						57	/	
8						58	/	
9						59		
10						60		
11						61		
12						62		
13						63		
14						64		
15						65	/	
16						66	/	
17						67		
18						68		
19						69		
20						70	/	
21						71		
22						72		
23	/					73	/	
24	/					74	/	
25						75		
26						76		
27						77		
28						78		
29						79		
30						80		
31						81		
32						82		
33						83		
34						84		
35						85		
36						86		
37						87		
38						88		
39						89		
40						90		
41	/					91		
42	/					92		
43	/					93		
44	/					94		
45						95		
46						96		
47						97		
48						98		
49						99		
50						100		
TOTAL IND.						TOTAL IND.	/	
TOTAL DEP.						TOTAL DEP.	/	
TOTAL CLAIMS						TOTAL CLAIMS	/	
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS								